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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 29/185,439 06/30/2003 PAT D,500,213

O.K. R.S.

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

none R.S.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/10/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <u>Robert DeHart</u> R.S. Examiner's Signature Initials	STATE OR COUNTRY PA	SHEETS DRAWING 7	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 2
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## TITLE

Child containment structure with ventilation panel

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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